PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number		1
Filing Date		_
First Named Inventor	John Michael Harper	
Title	Stock Shelving System	
Group Art Unit		
Examiner Name		
Attorney Docket Number	ACE-19189	_

I hereby appo	int:				
× Practition OR	_	010361	Nun	ce Customer nber Bar Code el here	
	Name		Registration N	umber	
	ey(s) or agent(s) to prosecute t United States Patent and Trade		ified above, and to		
Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Practitioners at Customer Number OR OR					
Firm <i>or</i> Individual Na	ime				
Address					
Address					
City		Sta	e	Zip	
Country			<u> </u>		
Telephone		Fax			
I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
SIGNATURE of Applicant or Assignee of Record					
Name	John Michael Harper	*			
Signature A HA					
Date / Sept 4/03					
	the inventors or assignees of record o signature is required, see below*.	f the entire interest or th	eir representative(s) ar	e required. Submit multiple	
☑ *Total of 1	forms are submitted.				

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to	U.S. Patent and Trademar	PTO/SB/01 (03-01) ed for use through 10/31/2002. OMB 0651-0032 k Office; U.S. DEPARTMENT OF COMMERCE a unless it contains a valid OMB control number.			
	Attorney Docket Numbe	ACE 10100			
DECLARATION FOR UTILITY OR DESIGN	First Named Inventor	John Michael Harper			
PATENT APPLICATION	COMPLETE	COMPLETE IF KNOWN			
(37 CFR 1.63)	Application Number				
X Declaration Declaration	Filing Date				
Submitted OR Submitted after Initia	Group Art Unit				
with Initial Filling (surcharge Filling (37 CFR 1.16 (e))	Evaminar Nama				

	Filing	required)	Examiner Name	; <u> </u>			
	As a below named inventor, I hereby declare that:						
	My residence, mailing address, and citizenship are as stated below next to my name.						
	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
	STOCK SHELVING SYSTEM						
		/T:415.41	ha Javantian)				
	the specification of which	(Title OF th	he Invention)				
	X is attached hereto					į	
	OR						
	was filed on (MM/DD/YYYY)		as United St	ates Application i	Number or PCT In	ternational	
	Application Number	and was a	amended on (MM/DD/YY	YY)		(if applicable).	
	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.						
	I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation- in-part applications, material information which became available between the filing date of the prior application and the national or						
	PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.						
	Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Cop YES	oy Attached? NO	
Г	Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:						
			. coppletition and profity du				

PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

				_			
l Direct all correspondence to: 1 v l	condence to: X Customer Number or Bar Code Label		010361 OR		Co	Correspondence address below	
Name	<u> </u>						
Name							
Address			_				
City			State	e		ZIP	
Country	Telep	hone				Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR :		A petition h	nas be	een filed fo	r this un	signed inventor	
John Michael Given Name (first and middle [if any])		Harper Family Name or Surname					
Inventor's Signature						Sopt 4/03 Date	
Kelowna		British		Canada	3	Canadian	
Residence: City		Columbia State		Country		Citizenship	
Station R., P.O. Box 2007						• · · · · · · · · · · · · · · · · · · ·	
Mailing Address							
Kelowna		British Colum	bia	V1X 4F	 (5	Canada	
City		State		ZIP		Country	
NAME OF SECOND INVENTOR:	$\neg \neg$	A netition ha	s hee		this unsi	gned inventor	
NAME OF SECOND INVENTOR.		71 polition na	0 000	THOU TOT		gnou inventor	
Given Name (first and middle [if any])				ly Name urname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Mailing Address							
						· <u> </u>	
City	;	State	;	ZIP		Country	
Additional inventors are being named on the	sup	plemental Addition	onal In	ventor(s) she	et(s) PTC	/SB/02A attached hereto.	